

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#10/N, O. A 10-13-13

RECEIVED

OCT 0 9 2003

Technology Center 2100

Group Art Unit:

2124

Examiner:

Malzahn, D.

Applicant:

Michael T. Moore et al.

Serial No:

09/605,503

Filing Date:

June 28, 2000

For:

METHOD OF IMPLEMENTING LOGIC FUNCTIONS USING A

LOOK-UP-TABLE

I hereby certify that this letter, the response or amendment attached hereto are being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on October 3, 2003.

NOTICE OF APPEAL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

The Applicant of the above-captioned patent application hereby appeals to the Board of Patent Appeals and Interferences from the decision dated July 3, 2003 of the Examiner finally rejecting Claims 1-20.

The payment for the appeal fee is enclosed herewith.

10/08/2003 DTESSEN1 00000044 09605503

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330.00 OP

If Applicant has not requested a sufficient extension and/or has not paid a sufficient fee for this matter, and/or for the extension necessary to prevent the abandonment of this application, please consider this as a request for an extension for the required time period and/or authorization to charge our Deposit Account No. 50-0541 for any fee which may be due.

Respectfully submitted,

By:

Christopher P. Maiorana

Reg. No. 42,829

CHRISTOPHER P. MAIORANA, P.C.

24025 Greater Mack, Suite 200

St. Clair Shores, MI 48080

(586) 498-0670

Date: October 3, 2003

Attorney Docket No.: 0325.00364

IN RE APPEICATION OF:

Attorney Docket: 0325.00364

RESPONSE TRANSMITTAL AND

Michael T. Moore et al.

EXTENSION OF TIME REQUEST (IF REQUIRED)

METHOD OF IMPLEMENTING LOGIC FUNCTIONS USING A LOOK-UP-TABLE

09/605,503

TITLE: FILED:

June 28, 2000

EXAMINER:

Malzahn, D.

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COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

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Enclosed please find a notice of appeal and a postcard along with the fee calculation below:

FEE CALCULATION FOR ENCLOSED AND EXTENSION REQUEST (IF ANY)

	Claims Remaining	Highest No. Previous	Extra Rate	Additional Fee
Total Claims	20 minus	20 =	0 x \$ 18.00	\$ 0.00
Independent Claims	3 minus	3 =	0 x \$ 84.00	\$ 0.00

Multiple Dependent Claim First Added

TOTAL IF NOT SMALL ENTITY .. \$0.00

[] []	SMALL ENTITY STATUS - If applicable, divide by 2
[]	Applicant also requests a month extension of time for response to the outstanding Office Action. The fee is\$0.00
[X]	Fee set forth for Notice of Appeal\$330.00
	TOTAL FEE\$330.00
	ommissioner is hereby authorized to charge any overpayment or underpayment of the above fee associated with this unication to Deposit Account No. 50-0541. A duplicate copy of this sheet is attached. CNRIST PHER P. MAIORANA, P.C.

24025 Greater Mack, Suite 200 St. Clair Shores, Michigan 48080

(586) 498-0670

Christopher P. Maiorana

Registration No.: 42,829

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By: Who Some ise Mary Donna Berkley